

16152 U.S. PTO
06/26/03

Approved for use through 04/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. #903
First Inventor JAMES D. MAHAN
Title "MESSAGE TABLE FOR ADJUSTING SPINAL AREA"
Express Mail Label No. ER 037 351 243 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Commissioner for Patents
Mail Stop Patent Application
P.O. Box 1450
Alexandria VA 22313-1450

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- ☒ Applicant claims small entity status.
See 37 CFR 1.27.
- ☒ Specification [Total Pages 26]
(preferred arrangement set forth below)
- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure
- ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 8]
a. ☒ Newly executed (original or copy)
b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
c. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(e)(2) and 1.33(b).
- ☐ Application Data Sheet. See 37 CFR 1.76

- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
a. ☐ Computer Reader Form (CRF)
b. Specification Sequence Listing on:
i. ☐ CD-ROM or CD-R (2 copies); or
ii. ☐ Paper
c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- ☐ Assignment Papers (cover sheet & document(s))
- 37 CFR 3.73(b) Statement of Power of Attorney (when there is an assignee)
- English Translation Document (if applicable)
- Information Disclosure Statement (IDS)
- Statement (IDS)/PTO-1499 Citations
- Preliminary Amendment
- Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- Certified Copy of Priority Document(s) (if foreign priority is claimed)
- Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
- ☒ DEPOSIT ACCOUNT ORDER IN DUPLICATE

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner

Art Unit:

For CONTINUATION OF DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the continuing application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name MARCUS L. BATES
Address 9002 SOUTH COUNTY ROAD 1312
City ODESSA State TEXAS Zip Code 79766
Country U.S.A. Telephone 432-563-2885 Fax 563-5833
Name (Print/Type) MARCUS L. BATES Registration No. (Attorney/Agent) 22,579
Signature Marcus L. Bates Date 06/26/03

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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10/609155
06/26/03

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known

Application Number
Filing Date
First Named Inventor
Examiner Name
Group Art Unit
Attorney Docket No.

HEREWITH

JAMES D. MAHAN

#903

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number
202-1265
MARCUS L. BATES

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee
to the above identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Utility filing fee	375.00
108 230	202 165	Design filing fee	
107 310	203 260	Plant filing fee	
108 740	204 375	Reissue filing fee	
114 160	205 80	Provisional filing fee	
SUBTOTAL (1) (\$)			375.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee Free	Fee Paid
13	20	0	0
3	3	0	0
Independent Claims			
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
103 18	203 9	Claims in excess of 20	
102 84	202 42	Independent claims in excess of 3	
104 280	204 140	Multiple dependent claim, if not paid	
109 84	209 42	** Reissue independent claims over original patent	
110 18	210 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)			00

**for number previously paid, if greater; for Reissue, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for ex parte reexamination	
112 820*	112 820*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
118 400	218 200	Extension for reply within second month	
117 920	217 460	Extension for reply within third month	
118 1,440	218 720	Extension for reply within fourth month	
128 1,960	228 980	Extension for reply within fifth month	
119 380	219 180	Notice of Appeal	
120 320	220 160	Filing a brief in support of an appeal	
121 280	221 140	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,280	241 640	Petition to revive - unintentional	
142 1,280	242 640	Utility issue fee (or release)	
143 490	243 230	Design issue fee	
144 820	244 310	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Processing fee under 37 CFR 1.117(a)	
128 180	128 180	Submission of Information Disclosure Sheet	
561 40	561 40	Recording each patent assignment per property (times number of properties)	
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 740	249 370	See each additional invention to be examined (37 CFR § 1.129(b))	
179 740	279 370	Request for Continued Examination (RCE)	
189 900	189 900	Request for expedited examination of a design application	
Other fee (specify)			

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type) MARCUS L. BATES

Signature

Marcus L. Bates

Registration No. (Attorney/Agent)

22,579

Complete if applicable

Telephone 432-563-2885

Date JUNE 26, 03

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2886.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

JAMES D. MAHAN

OUR FILE # 903

**NEW PATENT APPLICATION FOR INVENTOR: JAMES D. MAHAN
ENTITLED: "MASSAGE TABLE FOR ADJUSTING SPINAL AREA"**

EXPRESS LABEL # ER 037 351 243 US
DATE OF DEPOSIT: JUNE 26, 2003

I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.01 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, Box: "Patent Application", Washington, D. C. 20231.

Mailed By: JoAnn Bates, Secretary Signature: _____

ENCLOSED HERewith:

1. Acknowledgement postcard (self addressed and stamped);
2. \$375.00 Deposit Account Order for the filing fee, in full;
3. Express Mail Confirmation Letter, Itemizing the Application Contents;
4. Utility Patent Application Transmittal (PTO/SB/05 (03-01) (1 page);
5. Fee Transmittal For FY 2003 (PTO/SB/17 (-----) (1 page;
(INCLUDES DEPOSIT ACCOUNT INFORMATION);
6. Patent Application Fee Determining Record (PTO/SB/06 (05-03) in duplicate;
7. Petition for Patent, 1 page;
8. Specification on 26 pages **TOTAL, INCLUDING:**
9. 13 Claims on 7 pages; AND,
10. Abstract on 1 page;
11. Declaration for Utility Patent Application (PTO/SB/01 (10-01) (2 pages);
12. Power of Attorney (PTO/SB/81 (02-01) (1 page);
13. 4 sheets formal drawings containing 10 Figures **TOTAL, INCLUDING "FIGURE 2A "**;
14. Information Disclosure Statement by Applicant (PTO/SB/08A (04-03) 1 page;
15. Copy 9 Prior Art References.

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